

ARIZONA DEPARTMENT OF ECONOMIC SECURITY

Employment Security Administration



Office Location: _____

Fax No.: (____) _____

Phone No.: (____) _____

JOB ORDER FAX*(Please print or type and be as detailed as possible)*

Federal Employer Identification No. (FEIN): _____

Employer/Company Name: _____

Address: _____

City: _____ State: _____ ZIP: _____

Contact Person *(First and Last Name)*: _____

Phone No.: (____) _____ Fax No.: (____) _____ Other: (____) _____

Type of Business: _____ Job Location: _____

Position Title: _____ Number of Openings: _____

Experience Required *(Months/Year)*: _____ Number of Hours Per Week: _____Is Position Considered *(Check one)*: Permanent or Temporary *(How long?)*: _____Education Requirements *(Years, diplomas, certifications)*: _____Description of Job Duties *(Work performed, equipment, etc.)*: _____

Minimum Qualifications: _____

Do you require a valid driver's license? Yes No CDL Class: A B Hazmat

How to apply: Call for Appointment Mail Resume Fax Resume

Apply in Person *(Days and hours)*: _____ Other: _____

Days and Hours to be Worked: _____

Salary: _____ DOE: _____ Benefits: _____

DOES YOUR COMPANY HAVE ANY CONTRACTS WITH THE FEDERAL GOVERNMENT? Yes No

BROADCAST ORDER: Yes No

BROADCAST ALLOWS APPLICANTS TO VIEW YOUR ORDER, i.e. COMPANY NAME, PHONE NO., and "HOW TO APPLY" INSTRUCTIONS. Checking "NO" will allow applicants to view only the job title and description. Applicants will be required to see an employment representative to be prescreened.